

QUALITY REVIEW OF ENGINEERING CONSERVATION PRACTICES

FIELD OFFICE: \_\_\_\_\_

COUNTY: \_\_\_\_\_, MICHIGAN

CLIENT NAME 1/: \_\_\_\_\_

TQA ID: \_\_\_\_\_

REVIEWER: \_\_\_\_\_

DATE: \_\_\_\_\_

A	B	C	D	E	F	G
Practice Name and Code	Contract Year <u>2/</u>	Program (EQIP, CRP, WRP, PL-566 & Other)	Design Meets Technical Standards <u>3/</u> (Yes/No)	Construction Drawings Adequate <u>3/</u> (Yes/No)	Construction Adequate <u>3/</u> (Yes/No)	Support Documentation Adequate <u>3/</u> (Yes/No)
1.						
2.						

H	I	J	K	L	M	N
Job Class	Was Job Class Correct <u>3/</u> (Yes/No)	I & E Approved By and Date	Design Approved By and Date	Construction Approved By and Date	Employee Certifying Practice Application and Date	Was Job Approval Proper <u>3/</u> (Yes/No)
1.						
2.						

1/ If Natural Resources Conservation Service employee, so state.

2/ If this is a waste management practice, indicate date of waste management system plan.

3/ If answer is "No", explain in detail on reverse side as directed in General Manual, 330-GM, 405.3.  
Include comments on planning, quality of work, training needs, etc. on reverse.

INDICATE ACTION RECOMMENDED (CIRCLE ALL THAT APPLY):

- No deficiencies needing action.
- Deficiency corrected; no further action required.
- Deficiency needs action on the part of NRCS.
- Deficiency needs action on the part of landowner/operator.
- Corrective action may be required state-wide.

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REVIEWER’S COMMENTS:

ADDRESS: (1) Commendable items; and (2) Deficiencies noted, recommended actions to correct and prevent reoccurrence of deficiencies.

(1) COMMENDABLE ITEMS: \_\_\_\_\_

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(2) DEFICIENCIES AND RECOMMENDED ACTIONS: \_\_\_\_\_

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